

Real Deal Baseball

Medical Release

I hereby authorize the staff of Real Deal Baseball to act on my behalf according to their best judgment in any emergency requiring medical attention and I hereby waive and release Real Deal Baseball and JSerra High School from any and all liability for any injuries or illnesses incurred while at the baseball camp. I have no knowledge of any physical impairment that would be affected by the below camper's participation at Real Deal Baseball.

I also understand that Real Deal Baseball retains the right to use for publicity and advertising purposes, photographs of campers.

Camp Attending: Summer Camp

Player Name (please print) _____

Parent/ Guardian Signature _____

Insurance Company _____

Policy #: _____

Allergies _____

Medical History _____

Please fax or bring on day of camp:

Fax number- 714-283-4156

Real Deal Baseball
5818 Mountain Loop Trail
Anaheim, CA 92807